



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
2006-2007 SUMMARY REPORT OF IMMUNIZATION STATUS OF
MISSOURI PUBLIC, PRIVATE, AND PAROCHIAL SCHOOL CHILDREN

This completed CD-31 form must be forwarded to the
Missouri Department of Health and Senior Services
Bureau of Immunization Assessment & Assurance
P.O. Box 570
Jefferson City, MO 65102-0570 (573) 751-6124
by OCTOBER 15, 2006. toll free 1-866-628-9891

MAILING LABEL

Mailing Address Correct: [] Yes [] No
(If no, please make corrections on label)

Phone:

Email Address:

Prepared by:

Date:

Approved By (Superintendent
or School Administrator):

2006-2007	Grade Level													Other or Special Needs
	K	1	2	3	4	5	6	7	8	9	10	11	12	
Total Number of Students Enrolled														
DTaP/DTP/DT/Td	4+ doses	4+ doses	4+ doses	4+ doses	4 doses	4 doses	4 doses	4 doses	4 doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Polio	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
MMR (Measles, Mumps, Rubella)	2 doses	2 doses	2 doses	2 doses	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	2 measles, 1 mumps, 1 rubella	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Hepatitis B	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	3+ doses	
Students fully immunized														
Students in progress (See ACIP Schedule)														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Varicella	1 dose or proof of disease	1 dose or proof of disease												
Students fully immunized														
Students with proof of disease														
Students with medical exemption														
Students with religious exemption														
Students noncompliant with immunization records *														
Students noncompliant without immunization records *														
Grade Level	K	1	2	3	4	5	6	7	8	9	10	11	12	OT
Students with complete vaccine series														

* DENOTES NEED TO COMPLETE IMMP-10 REPORT

